INSTRUCTIONS: TYPE OR PRINT CLEA	•	•	mplete forms will be	e returned. Copy a	and attach additional
pages if necessary. Each page must be signification of the second page of the	M.I.	LAST NAME			
BUSINESS NAME (IF APPLICABLE)					
BUSINESS NAME (IF APPLICABLE)					
LOCATION OF ANIMAL(S) HOUS veterinarian accredited by the USDA that e Section 671.2 (nonresident only), Sections	each of those facilities meet mir	nimum applicable housi	ng requirements as	set forth in subse	
ADDRESS	CITY	STATE	ZIPCODE	ZIP CODE COUNTY	
ADDRESS	CITY	STATE ZIP CODE		COUNTY	
List all restricted animals in your possession of Use the following letters to denote sex: M=M within the next year. Unique Identifiers: M=Microchip, T=Tattoo, and A=Alternative M V=Volume or C=Count in the method field. being imported into California. For California	ale, F=Female, and U=Neutered of Use the following letters to den lethod. Aquaculture and fish app Remember to complete the Impa Residents Only: All native spec	or Unknown. Mark an "X note unique identifying r dicants: Identify the actual propertation Only Section cies obtained from a lice	" in the TO BE ACC methods (See Sect al number in the ID n n of the Restricted nsed California Wild	QUIRED column for ion 671.1(c)(2)(K), number field and ide Species Permit A dlife Rehabilitation I	ranimals to be acquired Title 14, of the CCR): entify either W=Weight, application for animals Facility require a Native
Species Exhibiting Permit. Contact the Licer COMMON NAME	SCIENTIFIC NAM	-			TO BE ACQUIRED
I certify under penalty of perjury under the	laws and regulations of the St	tate of California that al	I information on thi	is Restricted Speci	ies Permit Inventory o
Animals form is true and correct. I unders APPLICANT'S SIGNATURE (MUST BE IN II		formation may result in	denial or revocation	n of a permit and/o	or criminal prosecution.

LAS 9101 FG 1313 (New 11/10)